

**Sanitary Sewer Board
City of Fairmont
PO Box 1428
Fairmont, WV 26555-1428
Phone: (304) 366-0540
Fax: (304) 366-6242
ONLINE APPLICATION**

City of Fairmont Stormwater Permit Application

Permit #_____

Permit Fee_____

Date_____

Applicant_____

Applicant's Address_____

Applicant's Phone Number _____ Fax Number _____

Project Address_____

Tax Map Number_____ Parcel Number_____

Contact Person_____

Phone Number_____ Fax Number_____

Total Area of Project_____ Square Feet Acres_____

Description of
Project_____

For Office Use Only

Department
Requirements_____

Approved _____ Date_____ Approved By_____

Field
Notes_____

Project Number Assigned _____

Date_____

Inspector Assigned _____

Date_____

Stormwater Application Received _____

Date_____

Notice to Proceed _____

Date_____

Project Completed _____

Date_____

As Built Plan Received _____

Date_____

Final Sign Off _____

Date_____

Permit on File in Engineering _____

Date_____